



State of Wisconsin  
Department of Administration  
Document Sales and Distribution  
4622 University Avenue  
Madison, WI 53705-2156  
[DOADocumentSalesInformation@wisconsin.gov](mailto:DOADocumentSalesInformation@wisconsin.gov)

DOA-3330 (R4/2011)

## UDC Document Sales Order

### For Ordering Enforcement Materials for the Uniform Dwelling Code Modular Home Program Only

Only approved manufacturers may order these Insignias

#### Ordered By:

Name \_\_\_\_\_  
Organization's Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
P. O. Box \_\_\_\_\_  
City, State and ZIP + 4 \_\_\_\_\_  
Daytime Telephone (\_\_\_\_\_) \_\_\_\_\_  
E-mail Address \_\_\_\_\_

**To Order and/or for further Information please call:**  
(608) 266-3358 or Long Distance: 1-800-DOC-SALE  
(362-7253)

**FAX:** (608) 261-8150

Please make Check or Money Order payable to:  
**WI Department of Administration**

Open Monday through Friday, 7:45 am to 4:30 p.m.

**Inter-D Address:** DOA / 4622 University Ave. / DocSales

Stock Number	Quantity	Description	Item Price	Total
<b>SBD-9493</b>		UDC Modular Home Insignia – Single Non-Taxed	\$28.00	
		UDC Modular Home Insignia – 5 Pack Non-Taxed	\$128.00	
		UDC Modular Home Insignia – 10 Pack Non-Taxed	\$253.00	
		UDC Modular Home Insignia – 25 Pack Non-Taxed	\$628.00	

#### State Government Customers Only

##### General Services Billing Information

Customer Use Code \_\_\_\_\_  
Optional Data \_\_\_\_\_  
Optional Order Number \_\_\_\_\_  
Authorized Signature: \_\_\_\_\_

#### Credit Card Customers Only

- Orders by phone are accepted when purchases are made with VISA or MasterCard
- Include Credit Card Account Number, Signature, and Credit Card Expiration Date.

☐ MasterCard ☐ VISA

Credit Card Number \_\_\_\_\_

Expiration Date (mm/dd/ccyy) \_\_\_\_\_

Signature \_\_\_\_\_

**Total**

- Your order is subject to return if there are errors on the Order Form and/or an incorrect amount was submitted.**
- For assistance please call: (608) 266-3358**

#### For Office Use Only

Date (mm/dd/ccyy) \_\_\_\_\_ CSR \_\_\_\_\_  
Order No. \_\_\_\_\_ Customer No. \_\_\_\_\_  
Approval No. \_\_\_\_\_ New Exp. Date (mm/dd/ccyy) \_\_\_\_\_  
Amount Paid \_\_\_\_\_  
Payment Type ☐ CA ☐ CH ☐ V/MC ☐ GSBS ☐ FR